What kind of donor are you? Uncovering complexity in donor identity.

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Abstract

Identity is a useful lens to understand donation behavior. However, studies have typically conceptualized and examined donor identity as a generic, unidimensional concept. Through in-depth interviews with 52 blood donors, this study sets out to discover if there is more complexity to donor identity, and what implications this might have for marketing communications, in the context of donation of the self (e.g., blood, organs, time and effort). We use sentiment polarity and amplification analysis of inductive themes to uncover distinct patterns reflective of four different donor identities. We label these the Savior, Communitarian, Pragmatist, and Elitist, which are underpinned by theories of gift-giving, sharing, pragmatism and signaling respectively. The typology offers a theory-building mechanism to anticipate the effects of marketing stimuli on donation behavior. We conclude by presenting four theoretical propositions, for which we provide preliminary empirical evidence. The survey data is suggestive of action readiness for donation behavior when a marketing communication message is aligned with its intended donor identity.

KEYWORDS

Donation Behavior; Marketing Communication Strategies; Prosocial Identity; Donor Identity; Blood Donors

INTRODUCTION

Despite the increasing marketization of society, donation behaviors underpin efforts to solve wicked problems and create a sustainable society (United Nations, 2015). Whether at the corporate, foundation or individual level, the need for donations to non-profits to support their efforts to benefit others continues to increase (Basil et al., 2006; Charity Navigator, 2019). Non-profits, however, find it challenging to encourage people to donate and, more importantly, to continue donating (Lee, 2019), with approximately half stopping after their first donation (Khodakarami et al., 2015). As a result, non-profits spend a significant proportion of their financial and non-financial resources on marketing communication activities for donor acquisition and retention (Lee, 2019).

Individuals who hold a donor identity define themselves as giving and caring (Aquino & Reed, 2002; Grant et al., 2009), and prior research suggests a focus on donor identity offers a means to improve donor acquisition and retention rates (Aaker & Akutsu, 2009; Sargeant & Shang, 2011; Reed & Aquino, 2003). A potential limitation of this approach, however, is that only a generic, unidimensional form of prosocial donor or moral identity is considered (e.g., Aaker & Akutsu, 2009).

It is well understood, however, that prosocial behaviors are highly complex. Research for example, has recognised the seemingly self-interested motivations within what are defined as other-interested behaviors (Newman & Cain, 2014; Sargeant & Shang, 2011). In addition to altruism, prosocial behavior can be motivated by extrinsic rewards, emotional wellbeing, and reputational benefits (Small & Cryder, 2016). Self and other-interested motivations also interact, with self-interest typically being judged negatively. For example, offering inducements to potential donors may 'crowd out' altruistic motivations and result in less donating (Titmuss,

1970). There is some evidence for this effect in the blood donation context although the results are mixed (Chmielewski et al., 2012; Niza et al., 2013).

Simply describing donating as giving, therefore, belies the complexity entailed in this behavior. Similarly, assuming a unidimensional donor identity would overlook the multiplicity of dimensions within donor identity. This is likely to result in a generic marketing communications strategy impeding prosocial sensemaking about the self and the non-profits (Grant et al., 2008), leading to ineffective and thus wasteful expenditure. Uncovering multiple donor identities and customizing marketing communication strategies accordingly can be expected to improve the effectiveness of marketing interventions.

Our study aims to explore a more nuanced understanding of donor identity and its implications for marketing strategy. Using blood donation as a context and employing an inductive, exploratory approach (Miles et al., 2018), we conducted in-depth interviews with donors and used sentiment polarity and amplification analysis of major themes (Pang & Lee, 2008). In doing so, we make several contributions to theory and practice. First, in contrast with the generalized notions of identity in extant prosocial literature, we discover four distinct donor identities. We label these as the Savior, Communitarian, Pragmatist, and Elitist. We provide a comprehensive profile for each identity based on the goal for donating, desire for donation privacy, beliefs of personal costs of donating, and the need for reciprocity. We also include the emotion of pride and disappointment because of their importance to social identity processes (Coleman & Williams, 2013). In essence, we demonstrate that not all donors assume the identity of "givers" (Aaker & Akutsu, 2009) or have saving lives as their primary goal (Boenigk & Helmig, 2013). Indeed, our preliminary findings from a post survey study suggest that other identities (e.g., Pragmatists, Communitarians) may be more prevalent than Saviors.

Second, we draw parallels between the uncovered donor identities and theories of gift giving (Belk & Coon, 1993; Titmus, 1970), sharing (Belk, 2010), pragmatism (McCall, 1977), and costly signaling (Zahavi, 1995). These theoretical links suggest that the identities are likely to be generalizable to other prosocial contexts beyond blood donation (e.g., Cha et al., 2014; Loroz, 2007).

Third, by integrating our proposed typology of donor identities with Oyserman's (2009a, 2009b) identity-based motivation theoretical model, we develop a conceptual framework useful for future empirical validation and marketing application (MacInnis, 2011). This is expressed as a set of theoretical propositions that match marketing promotional tactics to the relevant donor identity to facilitate identity-congruent actions. Preliminary results from a post survey study suggest that the alignment between the identity type and communication message has the potential to enhance motivations to donate blood.

Last, we add to the range of segmentation approaches currently used by non-profits (Wood, et al., 2010). Our identity-based segmentation approach is likely to facilitate a more effective and efficient management of marketing promotional expenses and contingency scripting for service personnel to attract and retain donors.

CONCEPTUAL BACKGROUND

Understanding identity

Identities reflect the different roles that people play within society and help people gain self-understanding and be understood by others in a social context (Chattaraman et al., 2010). Reed et al. (2012, p. 310) define identity as "any category label to which a consumer self-associates that is amenable to a clear picture of what the person in the category looks like, thinks, feels and does." These category labels include either personal and contextually generalizable traits,

characteristics, goals, values, and beliefs (e.g., “I am a smart person,” “I am a courageous person”) or relationships, roles, or membership in a social group (e.g., “I am a parent,” “I am a firefighter”) (Oyserman, 2009a, 2009b; Reed et al., 2012). Reed et al. (2012) also suggest that identities have associated elements or characteristics that help define the identity (e.g., a firefighter is associated with bravery and physical fitness).

Many aspects of a person’s life can help define his or her identity. For example, consumer researchers have explored how people construct, maintain, and communicate their identity through the meanings associated with products/brands, services, and experiences they consume (Belk, 1988). People construct identities unconsciously and consciously, the latter in the form of goal-driven, consumer identity projects (Carrington et al., 2015). Conversely, their identity construction may be unconscious, such that it occurs incrementally and is only made conscious over time (e.g., Oakley & Halligan, 2017). Thus, identity empowers and expresses the beliefs and values a person holds, provides symbolic meanings about social interactions the person experiences, stimulates identity-based processing and evaluation of social experiences, and navigates the tension between social group identification and individual uniqueness (Belk, 1988).

Prosocial Identity

Research on donor, volunteer, and prosocial behaviors within the social psychology and non-profit literature show that when internalized, a prosocial identity can drive various behaviors, including donations of time, money, organs and blood (Chapman et al., 2018; Gargano et al., 2004; Lee et al., 1999). For example, consumer research finds that people with a moral identity are more likely to have favorable attitudes toward charitable requests (Reed & Aquino, 2003), that people with a strong volunteer identity are more likely to sign the organ-donation card (Gargano et al., 2004), and that people donate more when others who share their identity have also donated (Shang et al., 2008).

However, these studies have relied on the use of a generic prosocial identity to distinguish between donors and non-donors. A generic prosocial identity, in our view, represents a simplistic view and is unlikely to fully capture the variability and multi-dimensionality of donor identities. For example, in an effort to gain a more nuanced understanding of the role of identity in donation behavior, Aaker and Akutsu (2009) characterize donating as *giving* and use the terms interchangeably. Boenigk and Helmig (2013, p. 538) also operationalize donor identity salience in terms of *giving* (e.g., "Giving is an important part of who I am," "Giving means more to me than just donating money/blood"). This implies that a donor identity is akin to a *giver* identity. The expected reciprocity of givers (Belk, 2010), however, seems to contradict the one-way nature of most donation behaviors intended to benefit others (Eisenberg et al., 2007). The complexity of self and other-interested motivations for prosocial behaviors - including 'warm glow' emotional feelings, the reputational benefits of generosity, tax breaks and other rewards, (see Small & Cryder, 2016) - not only muddy the waters of motivation, but also suggest that the self-image of donation behavior is similarly complex and opaque. Indeed, given the evidence of the multiplicity of identities in other contexts (Carrington et al., 2015), donor identities other than the "giver" identity are likely to exist.

In this spirit, we undertook an inductive approach to uncover multiple identities within a blood donation context. The discovery of multiple donor identities has important implications for the efficiency and effectiveness of donor attraction and retention strategies employed by blood collection agents (BCAs). This is because the salience of donor identities varies as a function of situational cues (Aaker & Akutsu, 2009; Grant et al., 2009). When a donor identity is situationally cued, the use of identity-congruent marketing stimuli will make the donation act feel more meaningful and important to the individual and thereby encourage its repetition (Oyserman, 2009b). As stated, we also undertook a survey in a post-study and found some initial

evidence that identity-congruent communication messages have the potential to increase blood donation intentions. We next provide details of the methodology undertaken to uncover the multi-dimensional nature of donor identity.

METHODOLOGY

Data collection and sample

Blood donation was the context chosen to study donor identities for several reasons (Boenigk & Helmig, 2013; Lee et al., 1999). First, blood donation is a quintessential form of donation as it is voluntary and yet costly. Donors can start donating at any time after they reach the legal age for donations, and stopping donating entails no switching costs. Unlike many types of donations, a blood donor experiences some level of physical discomfort from the act – including anxiety, fear, pain, and iron depletion – meaning that blood donation is typically a highly considered and deliberate act (Lee et al., 1999). Second, it is costly to attract and retain donors, meaning that improving the efficiency of marketing efforts is important. The high setup costs required to socialize donors and test the suitability of their blood make it costly for organizations if an individual only donates once. As such, BCAs spend considerable funds on marketing communication strategies to retain donors with varying success. For example, in 2018-19 financial year, the Australian Red Cross spent almost AUD $4 million on marketing and AUD $12 million on fundraising (Australian Red Cross, 2018-2019).

As a means to generate and extend knowledge of both the conceptual foundations and the consequences of donor identities, we conducted an inductive, exploratory study (Miles et al., 2018). We recruited blood donors of different ages, gender, and stage of the donor career cycle. Initially, we recruited from a large central blood collection center and two mobile collection units. Donors were randomly approached at different times of the day, over a six-week period,

and asked to participate in an in-depth interview as they were relaxing in the refreshment area. This initial sample was skewed to younger donors, which is not reflective of the current donor panel, so we subsequently approached the BCA for recruitment assistance of older donors. After they provided us with contact details of older donors who were willing to participate in our study, we organized face-to-face interviews in the donors' home or workplace. These later interviews were more directed, to probe for the emergent theme of identity that had come up in the initial interviews. Sampling continued until we felt we reached data saturation. Of the sample of 52 donors, 35 were recruited in the first phase and 17 in the second phase. Two of the authors conducted all of the interviews. The final sample consisted of 48% male and 52% female donors. The average age of the participants was 40 years. In terms of donor lifecycle, 29% were novice donors (i.e., those who had commenced donating within the last year), 33% were infrequent donors (i.e., those who commenced more than a year ago and had donated no more than two times in the last two years), and 38% were regular donors (i.e., those who commenced over a year ago and had made at least two donations in the last two years). Table 1 provides a profile of the donors and their characteristics.

Insert Table 1 about here

In order to ensure consistency across the interviews whilst also providing the opportunity for further information to emerge, we employed a semi-structured interview protocol (see Web Appendix 1 for the interview protocol). The interviews began with grand tour questions aimed to provoke informants to provide first-person narratives of their donation experience and history. Participants were then asked about their donation behavior, what donation meant to them, their beliefs about the reward and recognition practices the BCA used, and their reasons for

continuing donating. During the interview participants were prompted to extrapolate further and provide additional information. The average number of words per interview was 2,472, and the average length of each interview was approximately 28 minutes. Formal ethical approval was sought and received by both the University's and the BCA's Human Research Ethics Committee. Informed consent was secured via recorded agreement for the interview. Informants were given a copy of the Plain Language Statement (which explained the purpose of the research project) prior to securing their participation in the interview.

Data analysis

In the first step, following the guidelines set out by Strauss and Corbin (1998), we conducted an inductive, open coding process that allowed us to incorporate and bring together concepts into first-order categories. Next, to develop a more thorough picture of the data, we used selective axial coding and went through an iterative process whereby we moved between the interview transcripts and the literature in order to refine the first-order categories into conceptual second-order themes (Strauss & Corbin, 1998). Figure 1 illustrates the structure of the data. Two authors independently coded each interview, and then discussed their coding decisions until they reached agreement. Any disagreements were resolved during a coder debriefing session with a third author. Web Appendix 2 provides illustrative quotes for each second order theme. Following this, two authors performed a sentiment polarity and amplification classification (described below) of the first-order themes for each individual informant. We considered these themes attributes of donor identity and looked for distinct patterns that defined a unique blood donor identity. We used this indirect method to uncover the donor identities because, as Reed et al. (2012, p. 310) state, "identities can be cued outside of conscious awareness."

Insert Figure 1 about here

Sentiment polarity classification determined whether informants' text had positive, neutral, or negative sentiment toward the theme in question (e.g., desire for donation to be public). Oyserman (2009b) indicates that anything deemed identity relevant is more likely to be positive than negatively valenced. We used the label "neutral" when the opinion expressed was ambiguous (Ortigosa-Hernandez et al., 2012). When an informant expressed no opinion on the relevant theme, we designated it as missing. Following this, we judged the strength or amplification of this sentiment (i.e., high, medium, or low), providing more fine-grained rating information (Pang & Lee, 2008). The sentiment was rated as high when the informant vocalized strong opinions using many descriptive adjectives. A sentiment was assessed as medium when the opinion was mentioned only once with few descriptive adjectives. Low was allocated to the sentiment when the informant hesitated or expressed a weak opinion e.g., "a little bit of" with perhaps one descriptive adjective. Figure 2 illustrates the data analysis process.

Insert Figure 2 about here

We employed member checks (Lincoln & Guba, 1985) to confirm the viability and credibility of our interpretations of the different identities (Belk, 1988). We mailed the description of each of the identities to a subset of the sample (11 informants) supplied by the BCA. The member checks verified the identities. Further details of our findings are available in Web Appendix 3.

EMERGENT FINDINGS: PROFILING IDENTITIES

Recognizing that identity is a gestalt of attributes that differentiate it from other attributes (Epp & Price, 2008), the sentiment polarity and amplification classification (Pang & Lee, 2008) facilitated the uncovering of unique configurations or patterns across four dominant themes. We began with the theme *goal for donating*, which is a key attribute that anchors the appeal or pursuit of the donor identity (Omoto & Snyder, 1995). Data analysis reveals that our informants exhibit four key goals for donating blood: (1) to save individual lives, (2) to benefit the community or society, (3) to do the 'right thing', and (4) to display a special competence that others do not possess.

Given the exploratory nature of the research and the aim to uncover ideal identity types, we sorted the informants according to their key expressed goal for donating and examined the distinct patterns of sentiment polarity and amplification that emerged on the other themes. These themes included desire for donation behavior to be public, beliefs of personal costs of donation, expectations for reciprocity, and emotional consequences of donating or not donating. We labeled the four donor identities uncovered as the Savior, the Communitarian, the Pragmatist, and the Elitist (see Table 1). These identities capture the goals and beliefs of donor personas.

Table 2 gives the distribution of informants across the four ideal identity types with their corresponding gender, age, and donor career stage. The largest cohort is the Communitarians (38%), followed by Pragmatists (33%), Saviors (23%), and Elitists (6%). We do not find an obvious pattern between identity type and the donor's level of experience with donation, gender, age, or other defining criteria, though each of the three categorized Elitists are regular, female donors.

Insert Table 2 about here

Saviors

These types of donors donate blood to help save a life, a theme aligned with the common metaphor of the "gift of life" that has shaped many communication campaigns for blood or organ donation (Lauritzen et al., 2001). As Laura (age 44) describes: *"I say again the importance is that you know you can save someone, even though you don't know who you are saving or what sort of person you are saving."*

Saviors consider the dyadic relationship between themselves and the individual recipient. Although they are not concerned about whose life they are "saving" specifically, they tend to appreciate when the BCA highlights individual recipients in its promotional campaigns or when they are told at the time of donation that their blood is being used immediately for an individual. Indeed, these donors are likely to view their donation as giving a part of their extended self, a transfer of ownership, and thus desire to form at least a mental bond with the recipient (Belk & Coon, 1993), as Kate (age 36) confirms:

> *Just a name and photograph of recipients is really important, because I think it makes it more personal, particularly if someone gets dozens or hundreds of donations as a recipient in here, it creates the possibility in the donor's mind that it may be one of them.*

Although Saviors do not want to be rewarded, as they believe this would add to the non-profit's operational costs, they do seek some form of reciprocity. This is consistent with gift exchange theory (Mauss, 1954), in which a debt (e.g., giving a gift) typically leads to the expectation that the debt will be repaid. In this context, it appears that sources other than the beneficiary can clear the "debt," as understood in generalized exchange or indirect reciprocity (Molm et al., 2007). For example, some Saviors view their donation as contributing to their balance score card of "good behaviors" that will somehow be rewarded in the future by a higher spirit; as Laura (age 44) describes: *"I'm doing good things like a praying thing; you do all these*

good things then in the spiritual world the gods give it back to you [or] they give it to your kids for their future." Others enjoy the enhanced image they receive in return when others know that they donate blood. The informants also find it easier to bring up the topic when the BCA provides Saviors with visible tokens, as Ameet (age 22) confesses: *"If anyone sees me with a sort of key chain or key ring, people would think he's either working for them [the BCA] or he's donated blood or something and it makes me feel good."*

Saviors also recognize the personal costs of donating, but they tend to apply a rational cost–benefit analysis to justify that the benefit outweighs any costs. As Harry (age 65) mentions*: "It involves giving up a bit of time … and the benefits that I see far outweigh half an hour of time or once every three months or whatever it is."* These "benefits" are for the recipient, but as Gaby (age 21) and Ameet (age 22) indicate, they include reputational benefits to the donor as well. Furthermore, as gift giving is often a recurring act, the giver learns from the cognitive imbalance and adjusts expectations accordingly (Belk, 1976).

Finally, consistent with the image of "saving a life and being a hero," Saviors feel proud after donating. As Teagan (age 57) notes: *"I'm proud to be able to do that, to donate."* Pride is an internally attributed emotion and exists in two forms authentic and hubristic, differentiated in terms of their attribution such as effort or personality trait respectively (Wubben et al., 2012). Authentic pride is the more prosocial emotion and is likely to be the type of pride expressed by Saviors, as its source derives from feelings of accomplishment and confidence (Sanders et al., 2018) of having contributed to the act of saving lives. As Jason (age 19) confirms: *"To think that what you're doing can actually save someone's life is pretty cool and pretty empowering. Makes you feel better."* This would suggest that Saviors are good candidates for procuring cooperation from others through their advocacy behavior, as Melinda (age 59) confirms: *"Yes, I encourage anybody"*, including her two children to donate.

In summary, Saviors view their donation as a dyadic exchange and, consistent with gift giving, appreciate some form of reciprocity. Although they recognize the personal costs of donating, they do not want to be rewarded. However, they do appreciate token gifts and forms of acknowledgment that help them communicate their donation, which in turn allows them to experience high levels of pride.

Communitarians

These types of donors donate blood because it provides them with a means by which they can invest in or give back to society or contribute to their community. Communitarians believe in "the greater good," justifying their inconvenience for the sake of a working blood system, as exemplified by Corinne (age 50):

> *It's kind of our health system, because it's about [what] benefits the people which are the community, you know what I mean. So it's the people within that system, the beneficiaries of the system.*

Unlike Saviors, Communitarians do not focus on the individual potential recipient of their donation. They frame their donation in terms of the collective common good and trust the BCA to distribute it where it is needed. As Yvette (age 64) explains: *"It doesn't bother me, I know I have done my duty and where it goes, that's for them."* This sense of duty, responsibility or obligation to donate arises from the expectations of a reliable blood system that can be drawn upon if the need arose.

The mindset of the Communitarian is consistent with the practice of sharing, which involves the "act and processes of distributing what is ours to others for their use as well as the act and process of receiving something from others for our use" (Belk, 2007, p. 126). Bob (age 20) even uses the word "share" to express his communal act: *"I think it's a good thing to be able to share, obviously to be able to help people who need it for medical reasons, and so it's a good thing to*

give something to help other people." More specifically, this is an example of sharing when the sphere of the extended-self expands the domain of common property, creating feelings of solidarity, trust, and bonding with others (Belk, 2010). These gratifying outcomes are illustrated by Kourtney (age 39) who recognizes that her donation has enhanced her inter-connectedness with others:

> *It makes you feel like you're part of the community…. There's other people giving blood and they're all doing good stuff and that kind of makes you feel like you're part of something.*

Communitarians believe that there are costs (e.g., time, effort, physical discomfort) to making a donation. They are particularly sensitive to time and become annoyed and critical of apparent inefficiencies in the donation process. They appear to have a mental threshold that, if exceeded, affects their intention to donate in the future. As Corinne (age 50) expresses:

> *It costs time, that's the real cost, but as long as it stays within a certain range, you can do it, and you can do it easily without too much juggling around. When the time component starts to swing out, that's when it could become a problem.*

Communitarians also have mixed sentiments about making their donation behavior public. They may mention it if it comes up in conversation but do not go out of their way to tell others or try to entice them to do likewise. In addition, Communitarians do not want to be rewarded for their donation, as they are aware that this would increase operational costs for the BCA. They are also only moderately positive about recognition efforts. Simple acknowledgment from collection staff in the form of a thank you appears to be what is preferred and assists them in feeling affiliated with the community. Communitarians also feel moderate pride in donating, but it does not appear to be overtly expressed, as Laney (age 42) describes: *"Proud without going around telling the whole world that I'm a blood donor."*

In summary, Communitarians view their donation as a necessary collective behavior. They feel a sense of duty to donate, and the behavior provides them with a means to affiliate with their community. While they incur some costs from donating, they do not want to be rewarded, though they are positively disposed to some personal acknowledgment and experience some pride.

Pragmatists

These types of donors have a pragmatic view of blood donation. They donate blood simply because they know there is a need for it, it serves a purpose, and they can do it. They recognize that the act achieves practical and functional outcomes (McCall, 1977; Brady et al., 2002), and they trust the BCA to get their donation to the people in need. As Jess (age 33) tries to explain: *"I guess it's trying to help, I mean it does not cost me anything, it's just a bit of free time I guess, and it's not much to be able to help somebody else."*

Pragmatists believe that compared with other types of charitable behavior (e.g., money, volunteering), donating blood is something that most people can do, and thus everyone should give blood, if they are capable. For example, Robert (age 60) shares:

> *I'm happy to give my blood because I know that they [the recipients] need it…. I don't look for any reward or anything better than that; I just look for personal satisfaction thinking that you're helping out … probably every one of us should give blood. I believe every one of us is capable and why not donate?*

This attitude prevails even when donors are made to feel special. For example, the BCA staff tell Stacey (age 47) that she is special because her O negative blood is in such high demand, but she feels otherwise:

> *Every time I go, they always go, "Oh, you're a special donor." And I say, "Yes, I know, I'm just so special…." [But] it's not just special people or freaky people or whatever they think people [are] that donate. It's just anyone can donate, you don't have to be special.*

Unlike Saviors and Communitarians who acknowledge that there are costs to donating blood, Pragmatists believe that the act is easy and downplay any personal costs (e.g., time, effort, physical discomfort) they may incur from donating. As Darrell (age 23) proclaims: *"Anyone can lie down on a bed and, provided they are healthy, give blood."*

Pragmatists firmly reject the idea of being compensated or rewarded for their donation because they do not view the act as an exchange. Rather, they regard it simply as an action that allows them to "do the right thing" and act in manner consistent with their moral norms or values." This may explain why Pragmatists only bring up their donation if it comes up in conversation and why they do not mention pride when asked about emotions following donation. As Darrell (age 23) reflects when asked about the benefits of donating: *"I don't think there are that many benefits apart from a slight feeling of 'I've done my good deed for the day,' but I don't really think you need a good feeling or a benefit because you're not doing anything that hard."* Indeed, acting consistent with one's norms or values—that is, "doing the right thing"—can be viewed as a form of active altruism that is taken for granted (Friedland & Cole, 2013). As Darrell indicates, "doing the right thing" is not to be marvelled and thus is not associated with any strong emotion. Smith (2012) finds that the accompanied feeling is best described as contentment, or a calm feeling of satisfaction, as Mike (age 56) describes: *"It's a self-satisfaction thing."* Given this, Pragmatists appreciate a simple thank you, as it reinforces the task-related worth.

People can behave altruistically on a regular basis purely for philosophical reasons (Friedland & Cole, 2013), as "doing the right thing" communicates the courage and desire to be true to one's ideals, contributing to well-being (Smith, 2012). Pragmatists appear to be similar to what Friedland and Cole (2013, p. 1203) describe as utilitarian morally mature people who "behave altruistically as a matter of course, simply because they know it to be right, not because they get a rush of emotive satisfaction." Bryan (20) affirms this notion when describing what a

"decent person" should do: *"I suppose as a decent person you should feel that it's something you can do, and if society in general does that, there would be a lot less of a problem with shortages."*

In summary, Pragmatists view their donation as simply the right thing to do, which does not cost much. They do not actively promote their donation behavior but do not hide it either. They appreciate a simple thank you but are not interested in other forms of acknowledgment, and rather than pride, they feel either no emotion or a mild sense of satisfaction.

Elitists

In strong contrast with the Pragmatists' attitude that "anyone can do it," Elitists donate blood because they believe that they possess a special characteristic, a rare capability. This capability is expressed in terms of a lack of fear of needles or having great veins. For example, Elizabeth (age 72) shares: *"I can do it and not everybody can. My daughter doesn't have a vein in her body and I have a grandson [who] faints at the sight of a needle."* Similarly, Debbie (age 24) declares: *"I'm stronger than a lot of people, especially men who can't handle a needle. Men, they can slice their arms and do whatever, and some tiny little needle and they're terrified of it."*

Thus, Elitists acknowledge that blood donation involves high personal costs for others but not for themselves because of their rare capability, as Carlotta (age 45) notes:

> *My husband doesn't donate blood because he's a wuss [coward]. He thinks it hurts…. You know it stings for like 10 seconds and then the rest of the time you don't even realize…. Yes, I think I am special and other people that do it are special too.... Like I say, I think I was born to do it.*

Compared with the other donor identities, Elitists are not averse to being compensated or rewarded, though such incentives do not affect their level of donation, as Carlotta (age 45) explains:

> *If they turned around and said, "OK all blood donors, you're going to be paid now," or "We're going to give you free movie vouchers" or whatever, I'm not going to say no to it, but it certainly would not affect me whether I gave or didn't give, because I would still continue doing what I'm doing now for nothing.*

"The need to see oneself as unique is a potent and continuous force in our society" (Snyder & Fromkin, 1981, p. 3). Accordingly, consumers' need for uniqueness motivates their pursuit of differentiation from others to enhance personal and social identity (Tian et al., 2001). Elitists view themselves as unique and want others to recognize this, as Carlotta (age 45) notes: *"It's nice to be recognized, especially when you realize that you are a minority really, not the majority."* They prefer public recognition or tokens, which help increase the "broadcast efficiency" (Smith & Bird, 2000) of the costly prosocial act, making it more conspicuous to others. For example, Elizabeth (age 72) often displays that she is a donor: *"I'm proud of giving I suppose, yes, I have it [badge] on one of my jackets…. It's like wearing a daffodil to show you've given to the Cancer Council."* Similarly, Debbie (age 24) prefers a conspicuous BCA token (e.g., key ring, diary, refrigerator magnet):

> *Things you can show to other people are always good ones, like the little diary. I can get out my little diary and go, "Look, look I've got a little diary…. Na na na na…." Yes, it would be more to show that I have done it, a thing that shows I can do it.*

This belief of being special and a minority somewhat clashes with the expressed desire to recruit others, as Debbie (age 24) states: *"I feel very proud and I try to rope everyone into it now because I can donate on my own, so I try as much as I can to get others into doing it."* Perhaps the recruitment of others is not Debbie's real goal, but it gives her a socially legitimate excuse to broadcast her perceived unique capability. This suggests that the high level of pride Elitists express may differ from that of Saviors. That is, it is likely to be hubristic pride, which is tied

more strongly to attributions of personal excellence rather than to actual accomplishments (Wubben et al., 2012) and is generated as a consequence of favorable comparisons of the self with others (Oveis et al., 2010). This suggests that cooperation from others is less likely to be forthcoming from the advocacy efforts of Elitists, as others may infer arrogance or conceit (Sanders et al., 2018) rather than confidence in their actions (Wubben et al., 2012).

According to the handicap principle (Zahavi, 1995) and signaling theory (Griskevicius et al., 2007), these types of prosocial acts serve as costly but honest signals of quality (i.e., handicaps) by which the performer gains social recognition, status and prestige. Thus, the prosocial behavior is not a selfless act, but a self-focused one to signal one's fitness level to rivals and quality reputation (Zahavi, 1995). This may explain why Elitists become upset when the BCA prevents them from donating. The rejection is difficult to accept because it threatens their superior competence identity, as Elizabeth (age 72) shows by continuing to donate despite her advanced age and the need to endure medical tests to validate her fitness:

> *I was supposed to stop when I was 70, and I'm 72 now. That year I had to go and get a doctor's certificate to say it was okay for me to give, and they said you'll have to do that every year.... That's a pain. I've been to the doctor so many times for things … only not because I'm sick [but] because they want more tests and more things. I had to do pathology tests which I found a bit of a nuisance, but I wouldn't call it a downside.*

This identity appears so important to Elitists that they assume they can sustain the donation behavior indefinitely, as Carlotta (age 45) stresses: *"I would never, other than the fact that if for health reasons I couldn't do it, it would be the only reason that I would ever give up."* The strong commitment and loyalty to donating make Elitists a valuable asset to the BCA.

In summary, Elitists consider themselves special because they have a competence which allows them to endure high costs in helping that they believe most others cannot. They are not

averse to being rewarded and are especially drawn to tokens that conspicuously promote their identity. They feel high levels of pride and are extremely disappointed when they are unable to donate.

Discussion

A prosocial donor or moral identity has previously been represented in a generalized, unidimensional form (e.g., Aquino & Reed, 2002; Grant et al., 2009). Using a blood donation context, we demonstrate that the role of identity in donation behavior is more nuanced. Specifically, we uncover four types of donor identities—Saviors, Communitarians, Pragmatists, and Elitists.

Our research has several theoretical implications. First, it refines the concept of prosocial identity by putting forth a psychologically based typology representing donors' self-image. This typology not only offers a new and unique way to understand donors but also helps us comprehend why donors have different motivations, why costs sometimes are or are not a deterrent to blood donation, why rewards and recognition appeal to some but not other donors, and why some donors want to know who receives their donation and how it is managed and others do not care.

Second, our research shows that as a concept, donor identity is more complex than the previous generic, unidimensional conceptualizations have presented (Aquino & Reed, 2002; Grant et al., 2009; Small & Cryder, 2016). Our typology is underpinned by theories of gift giving, sharing, pragmatism, and costly signaling. This is an important contribution as it expands our understanding of what it means to be a donor and why donors have different responses to contextual and marketing stimuli, including personal costs, communications, and reward and recognition.

Last, our donor identity typology, when integrated with Oyserman's (2009a, 2009b) identity-based motivation model, helps us forward several theoretical propositions. This model suggests that identities can be situationally cued outside conscious awareness and without systematic processing, producing a motivational pull toward identity-congruent procedures and actions. When a donor identity is situationally cued—for example, walking past a blood donation billboard on the way to work—its relevance and influence will increase.

Building on Aaker and Akutsu (2009), using Oyserman's (2009a, 2009b) identity-based motivation theory, we illustrate visually in Figure 3 the potential usefulness of our donor typology. When the donor identity is situationally cued, it is "procedurally ready" to make sense of marketing stimuli and experiences using an identity-congruent mindset. If the sense-making is congruent with the donor identity, a motivational pull to donate (action readiness) is likely to follow. For example, the use of conspicuous, tangible items, such as a key ring, water bottle, or diary, will likely aid the donation act in being publicly complimented by others, eliciting feelings of pride for Saviors and Elitists. This pride is suggested to provide the motivational pull to continue donating. However, if the sense-making is incongruent with the donor identity, individuals might have little motivation to act, and even if the act feels like an obligation, it might still feel wrong, and the individual's well-being could be compromised. For example, BCA marketing communication suggesting that anyone can donate blood would likely prevent action readiness for Elitists, as the action to donate would not be congruent with attaining their desired identity goals of uniqueness, status, and prestige. Thus, the integration of the identity-based motivation model with our donor identity typology allows us to suggest propositions regarding the action readiness of each type of identity when faced with congruent targeted marketing stimuli:

P1: *Saviors are action ready to donate when (1) non-profit communications advocate donation as a gift or donors as heroes, (2) non-profits communicate the individuals who have benefited from the donation, and (3) non-profits recognize donors in conspicuous, tangible ways that help them accrue a good reputation and generate pride.*

P2: *Communitarians are action ready to donate when (1) non-profit communications advocate sharing and affiliation with the community, (2) non-profits advocate the need for the collective to contribute for a sustainable resource from which to draw on, and (3) non-profits facilitate the donation process and minimize personal costs.*

P3: *Pragmatists are action ready to donate when (1) non-profit communications advocate the shortage of the resource and its need, (2) non-profit communications advocate that everyone has the ability to donate, and (3) non-profits advocate that donation is the "right thing to do."*

P4: *Elitists are action ready to donate when (1) non-profit communications advocate that donors are unique, special, or possess a characteristic that is rare and (2) non-profits recognize and, to a lesser extent, reward donors in conspicuous, tangible ways that help them accrue a good reputation and generate pride.*

Insert Figure 3 about here

In order to garner preliminary support for our central proposition that alignment between the identity type and communication message has the potential to enhance motivations to donate blood, we undertook a post survey study. We provide the details below.

POST STUDY

The aim of this study was to provide preliminary empirical evidence for the four donor identities that emerged from our qualitative research and their relationship with marketing communication messages. First, we screened 800 participants who reside in United Kingdom on Prolific, an online participant panel (www.prolific.co), to identify blood donors. Next, we sent out a survey to the 271 participants who indicated they had donated blood at least once in the past five years. Of these 271 participants, 228 (73.2% female, M_{age}= 35.7) completed the survey; 54.8% of these participants had donated blood in the last 1-3 years.

Participants were provided with short descriptions of the four blood donor identities (Savior, Communitarian, Pragmatist, and Elitist; please refer to Figure 4) labelled as Blood Donor Type A, B, C, and D respectively in a randomized order. They were asked to select the donor description that they resonated most with.

Insert Figure 4 about here

Participants were then shown four communication messages on blood donation in the form of slogans (slogan A, B, C, D) in a randomized order. The four slogans which were inspired by actual examples in the media, were shown on a plain background to minimize the potential of confounds (e.g., design, aesthetics). Each slogan tapped into only one of the four donor identities and stated why one should donate blood (see Figure 5). Participants were then asked to rank the slogans in the order of how much each appealed to them as a blood donor (1 = it appeals to me the most; 4 = it appeals to me the least). Following the rankings, participants indicated the degree to which each slogan would motivate people like them to donate blood on a 7-point scale (1 = not motivating at all; 7 = very motivating). Finally, participants reported their demographics and were debriefed.

Insert Figure 5 about here

Results

Distribution of Donor Identity Type: Of the 228 blood donor participants, 27.6% identified themselves as Saviors, 49.6% identified as Pragmatists, 20.6% as Communitarians, and 2.2% as Elitists. These results provide initial evidence that all four identity types that we uncovered in the qualitative part of the research have representation in the sampled population.

Ranking of Slogans: The results show that slogan A, "Be a Hero. Donate Blood and Save a Life" was ranked first or second by 76.2% of the participants who identified themselves as Saviors. Slogan B, "Share with Your Community. Donate Blood for the Greater Good" was ranked first or second by 53.1% of the Communitarians. Slogan C, "There is an Urgent Need. Donate Blood, it's the Right Thing to Do" was ranked first or second by 79.7% of the Pragmatists. Given the small number of Elitists (n = 5) in the data, we omitted these from the analysis. Overall, the results are indicative of the central proposition that promotional messages which resonate with identity may be more effective than the ones that don't.

Motivation to *Donate Blood:* The results show that for participants who identified as Saviors, slogan A was rated as more motivating compared to slogans B, C, and D (mean $_{\text{slogan A}}$ = 5.92, mean $_{\text{slogan B}}$ = 4.71, mean $_{\text{slogan C}}$ = 5.44, mean $_{\text{slogan D}}$ = 3.40, *ps*<.01 for all comparisons except for slogan A vs. C, $p = .07$). For participants who identified themselves as Communitarians, slogan B was rated as less motivating than slogan A (mean $_{\text{slogan B}}$ = 5.09, mean $_{\text{slogan A}}$ = 5.57, t (46) = -2.06, $p = .05$), similarly motivating as slogan C (mean $_{\text{slogan C}}$ = 5.04, $p > .80$), and more motivating than slogan D (mean $_{\text{slogan D}}$ = 2.68, t (46) = 9.97, $p < .001$). For participants who identified themselves as Pragmatists, slogan C was rated as more motivating than other slogans (B, C, and D) (mean $_{\text{slogan C}}$ = 5.70, mean $_{\text{slogan A}}$ = 5.43, mean $_{\text{slogan B}}$ = 4.58,

mean $_{\text{slogan D}}$ = 2.58, *ps* < .001 for all comparisons except for slogan C vs. A, *p* = .10). Again we excluded Elitists because of their small sample size.

In order to gain more clarity on Communitarians we compared how motivating slogan B was for each of the three identity types. In line with expectations participants who identified themselves as Communitarians rated slogan B (designed to align with the Communitarian identity) as significantly more motivating than those who identified as Pragmatists (mean $_{\text{Communitarians}}$ = 5.09, mean $_{\text{Pragmatists}}$ = 4.58, , t(158) = 2.45, *p* < .05), and rated it as directionally more motivating than participants who identified as Saviors (mean $_{\text{Communitarians}}$ = 5.09, mean $_{\text{Saviors}}$ = 4.71, t(108) = 1.40, *p* = .16). These results suggest that slogan B which was designed to align with the Communitarian identity was more motivating to participants who identified themselves as Communitarians compared to those who identified as Saviors and Pragmatists.

Discussion

There are two important insights from the post survey study. First, each of the four donor identities that emerged from the qualitative inductive study are represented in the data. This provides empirical evidence for the different identity types. Also, worth noting is the large proportion of participants (49.6%) who identified themselves as Pragmatists, which is significantly greater than the proportion of people who identified themselves as Saviors (27.6%; X^2 (1, 176) =14.21, *p* < .01). This is interesting, as well as concerning, especially in light of the general practice of using "life-saving" as a central rhetoric in blood donation advertisements. Given the significant number of pragmatists out there who donate blood because it is the 'right thing to do', organisations should broaden their communication messages to include this group. Second, the findings from the survey provide initial evidence for our propositions that marketing communication messages should align with the identity type to facilitate donation.

MANAGERIAL IMPLICATIONS

In addition to the aforementioned theoretical contributions, our research has several managerial implications. First, our discovery of the different donor identities offers a new structural framework to segment donors. Research widely acknowledges that the efficiency of marketing resources spent on relationship building and maintenance largely depends on whether these resources are tailored to the characteristics of specific market segments (e.g., Payne & Frow, 2005). In line with this notion, research has employed various segmentation bases of socio-demographic (e.g., age, gender, income), psychographic (e.g., motives, values), and behavioral (e.g., level, type, and frequency of donations) factors to understand donation behaviors in the non-profit sector (e.g., Rupp et al., 2014; Wood et al., 2010). We offer another form of segmentation that responds to Rupp et al.'s (2014) call for alternative approaches to donor segmentation that can potentially help improve and optimize non-profit marketing efficiency.

When a donor identity is situationally cued, an identify-specific marketing message could create a motivational pull towards the identity congruent (donation) behavior, increasing its marketing efficiency. For example, after profiling a donor, non-profits can employ a targeted promotion strategy to increase the likelihood of donation behavior; thereby improving the cost-effectiveness of the promotion strategy. For example, Swedish blood donors currently receive an automatic text message when their blood has been used for an individual (Basu, 2015). Although this notification may be effective with Saviors, it is likely to have no effect on the behavior of Communitarians, Pragmatists, and Elitists. This is because they either trust the BCA to use the donation appropriately, as in the case of Communitarians and Pragmatists, or they are simply not interested, as in the case of Elitists. This identity-based segmentation strategy therefore suggests an alternative approach to the traditional segmentation bases.

Our research also has implications for the design of rewards and incentives that can be

offered to donors. When people participate in donation behavior, they "will begin looking for internal and external feedback to reinforce their identity (e.g., self-perception processes as well as opportunities to signal their new identification to others)" (Reed et al., 2012, p. 312). For example, if the "donated gift" is not formally acknowledged to allow reputational benefits or is not repaid in some way (indirect reciprocity), Saviors are unlikely to repeat their donation behavior. In contrast, the lack of reputation incentives or indirect reciprocity may not discourage Pragmatists. Further, as Pragmatists seem to have strong internalized norms about helping, the significance of their donation should not be exaggerated. Rather, the ordinariness of the donation should be emphasized.

Finally, our identity typology can also assist the non-profit to adapt their donor interactions in contingency situations. For example, we learn that Communitarians are particularly sensitive to personal costs, so this suggests that sacrifices need to be minimized and service recovery efforts need to be particularly astute towards this group to ensure their return.

LIMITATIONS AND FUTURE RESEARCH

We outline here some suggestions that we hope will seed novel research programs that build on our typological theory of donor identities. First, the generalizability of the typology must be tested in the giving of self in other domains. For example, the Savior identity may be less relevant to donation contexts where lives are not at stake if donations are not forthcoming. Also blood donation is a relatively egalitarian prosocial behavior (i.e., a recipient of blood may simply find themselves in an unfortunate circumstance), whereas many prosocial behaviors are positioned as a benevolent transfer from the "haves" to the "have-nots" in order to benefit others in society (Basil et al., 2008). This may explain why we found so few "Elitists" though there is face validity to the assertion that the archetype may have more relevance in other charitable

domains. Further, it may also explain why the alignment of the beneficiaries' group identity with that of the donor appears less important in blood donation, unlike in other charitable contexts (Park & Lee, 2015).

Second, our identities are necessarily ideal types. The popularity of a typology is tied to the fact that it offers a parsimonious way of summarizing complex configurations of variables (Doty & Glick, 1994). However, one limitation of a typology is that it assumes that the relevant dimension distributions are bi-modal, that is people tend to have either a little of the dimension central to a given type or a lot of that dimension. However, relatively few people are likely to be at the extremes that correspond to the typal categories. In short, people tend not to fit neatly into types and hence our focus on the unique combination of patterns of sentiment regarding the themes. This means that each of the four donor identities need to be viewed as an ideal form that is useful for describing and understanding individuals to the extent that they approximate it. Indeed, donors may be more or less similar to an ideal type which represent a unique combination of the dimensions (Doty & Glick, 1994). Our post survey study matching a marketing communication message with its corresponding donor identity demonstrates correlations that need to be verified. Specifically, future research needs to develop scales to operationalize the identities, and empirically test the suggested relationships between congruency of identity type with marketing tactics and donation behavior.

Third, with our interviews we captured perspectives from donors in vivo or in retrospect. This limits our ability to detect a "process story" of identity transitions with triggers and a potential life cycle of prosocial identity evolvement over time (Carrington et al., 2015). For example, it is entirely plausible that an individual could start as a Savior and, with donation experience, evolve into an Elitist. Discovering such change would require a longitudinal study in which informants are followed for an extended period, both in their blood donation behaviors

and in other prosocial behaviors that are part of their repertoire. Further research could also explore the degree of overlap or consistency between a person's donor and other assumed identities. Correlations between identities may play a role in maintaining a sense of consistency within the self (Reed et al., 2012).

In addition, research could test the veracity of our typology across cultures. In particular, non-Western cultures tend to be more communal and collectivist (Gelfand et al., 2004); therefore, they may be more inclined toward a Communitarian identity (Belk, 2010). Given that blood supply shortages are most severe in developing countries (World Health Organization, UNAIDS, and UNICEF, 2011), inducing the Communitarian identity through public education campaigns may be of benefit.

Donors gave reasons other than those used to define the prosocial identity. Role model mimicking, peer pressure, upstream reciprocity (i.e., have been helped in the past), and downstream reciprocity (i.e., hope to be helped in the future) surfaced across the identity profiles in no obvious pattern. How these drivers interact with the cuing of prosocial identities needs to be investigated as they may override the necessary matching process required for procedural and action readiness.

Finally, our findings suggest that assuming donor identities provides individuals with value. For example, Saviors derive behavioral confirmation that they are generous people and even perhaps heroes, Communitarians enhance their sense of belonging and fulfill their obligation to their community, and Elitists obtain status and high self-esteem. These three identities feel good about donating and experience pride. Only the Pragmatists, who feel little emotion, appear to derive no obvious utility from donating blood. They donate for what appears to be purely altruistic reasons, because there is a need and it is the "right thing to do." Future research can examine whether pure altruism (suggestive of Pragmatists) or a mixture of self-interest and

other-interest in motivation (suggestive of Elitists) leads to greater sustained donation behavior.

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Table 1. Comparison of donor identities on themes

Dimension	**Savior**	**Communitarian**	**Pragmatist**	**Elitist**
Goal: To save lives To benefit the community To do the right thing To display special competence	 Positive (high) - - -	 - Positive (high) - -	 - - Positive (high) -	 - - - Positive (high)
Desire for donation behavior to be public	Positive (high)	-	Positive (low)	Positive (high)
Beliefs of personal costs of donation	Positive (medium)	Positive	Negative (high)	Negative for self but positive for others
Expectations for reciprocity: Reward Recognition	 Negative (high) Positive (high)	 Negative (high) Positive (medium)	 Negative (high) Positive (low)	 Positive Positive (high)
Emotional consequences of donating	Pride (high)	Pride (medium)	Pride (low)	Pride (high)
Emotional consequences if unable to donate	-	-	-	Disappointment (high)

Table 2. Profile of donors across four ideal identity types

		Informant Alias	Age	Gender	Donor Career Stage
Saviors	1.	Ameet	22	Male	Novice
	2.	Marg	18	Female	Novice
	3.	Laura	44	Female	Novice
	4.	Prakash	22	Male	Novice
	5.	Gurpad	38	Male	Novice
	6.	Jason	19	Male	Infrequent
	7.	Gaby	21	Female	Infrequent
	8.	Kate	36	Female	Regular
	9.	Teagan	57	Female	Regular
	10.	Tim	68	Male	Regular
	11.	Melinda	59	Female	Regular
	12.	Harry	65	Male	Regular
Communitarians	1.	Corinne	50	Female	Novice
	2.	Jack	19	Male	Novice
	3.	Bec	63	Female	Novice
	4.	Bob	20	Male	Novice
	5.	Valerie	52	Female	Novice
	6.	Jerry	54	Male	Infrequent
	7.	Kourtney	39	Female	Infrequent
	8.	Rodney	26	Male	Infrequent
	9.	Chris	20	Male	Infrequent
	10.	Jayne	52	Female	Infrequent
	11.	Tabitha	30	Female	Infrequent
	12.	Des	53	Male	Infrequent
	13.	Damien	50	Male	Infrequent
	14.	Yvette	64	Female	Infrequent
	15.	Brie	50	Female	Infrequent
	16.	Laney	42	Female	Infrequent
	17.	Annie	36	Female	Regular
	18.	Eve	57	Female	Regular
	19.	Rory	42	Male	Regular
	20.	Russel	38	Male	Regular
Pragmatists	1.	Graham	44	Male	Novice
	2.	Michelle	20	Female	Novice
	3.	Hallam	42	Male	Novice
	4.	Layla	20	Female	Novice
	5.	Bryan	20	Male	Novice
	6.	Jess	33	Female	Infrequent
	7.	Darrell	23	Male	Infrequent
	8.	Clarke	20	Male	Infrequent
	9.	Shana	26	Female	Infrequent
	10.	Cory	31	Male	Regular
	11.	Kylie	58	Female	Regular

	12.	Stacey	47	Female	Regular
	13.	Denise	67	Female	Regular
	14.	Jeremy	20	Male	Regular
	15.	Robert	60	Male	Regular
	16.	Mike	56	Male	Regular
	17.	Sam	35	Male	Regular
Elitists	1.	Carlotta	45	Female	Regular
	2.	Elizabeth	72	Female	Regular
	3.	Debbie	24	Female	Regular

Novice donors are those who have commenced donation in the last year.
Infrequent donors are those who have commenced donation more than a year ago and have made no more than two whole blood donations in the last two years.
Regular donors are those who have commenced donation more than a year ago and have made more than two donations in the last two years.

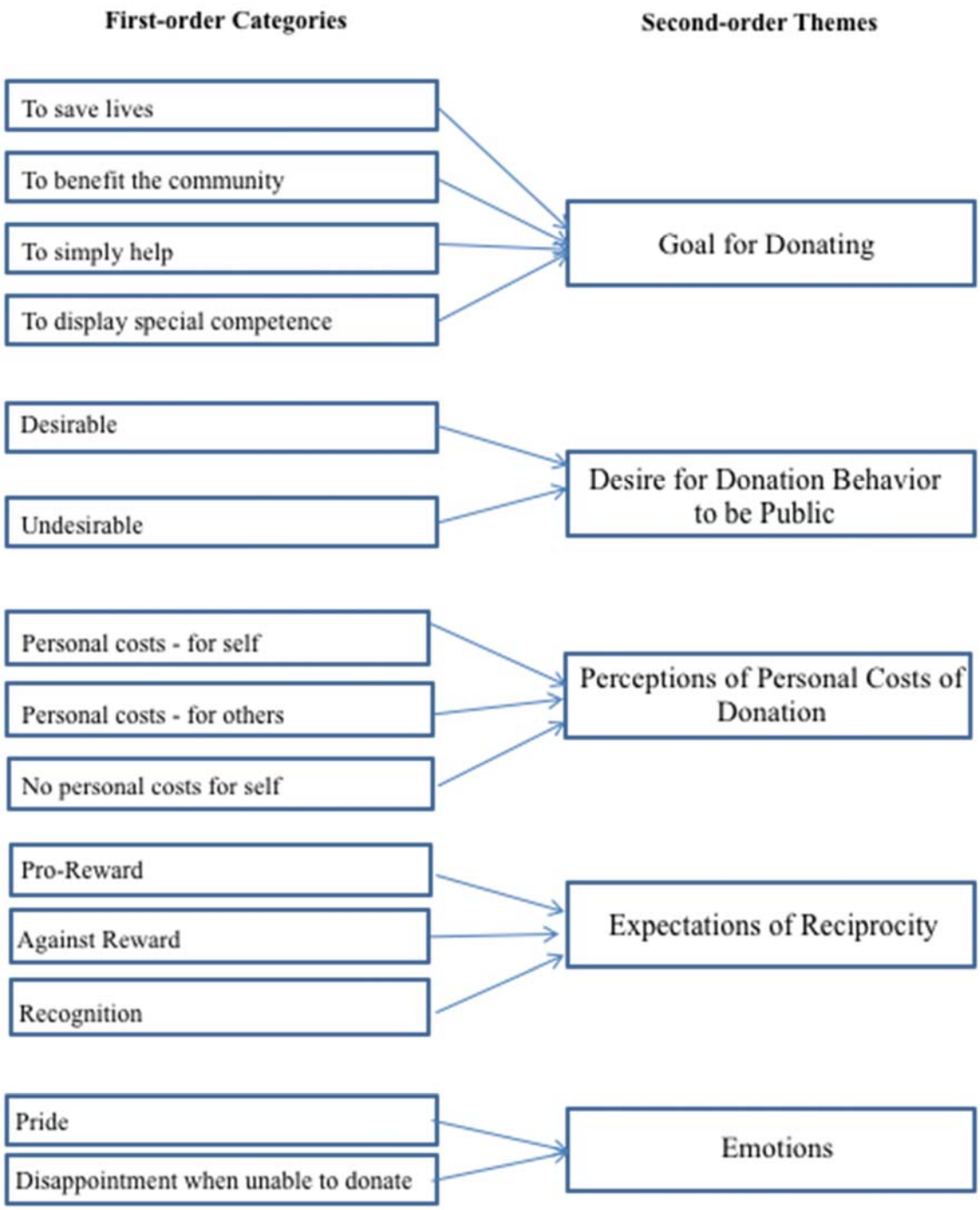

Figure 1. Data structure

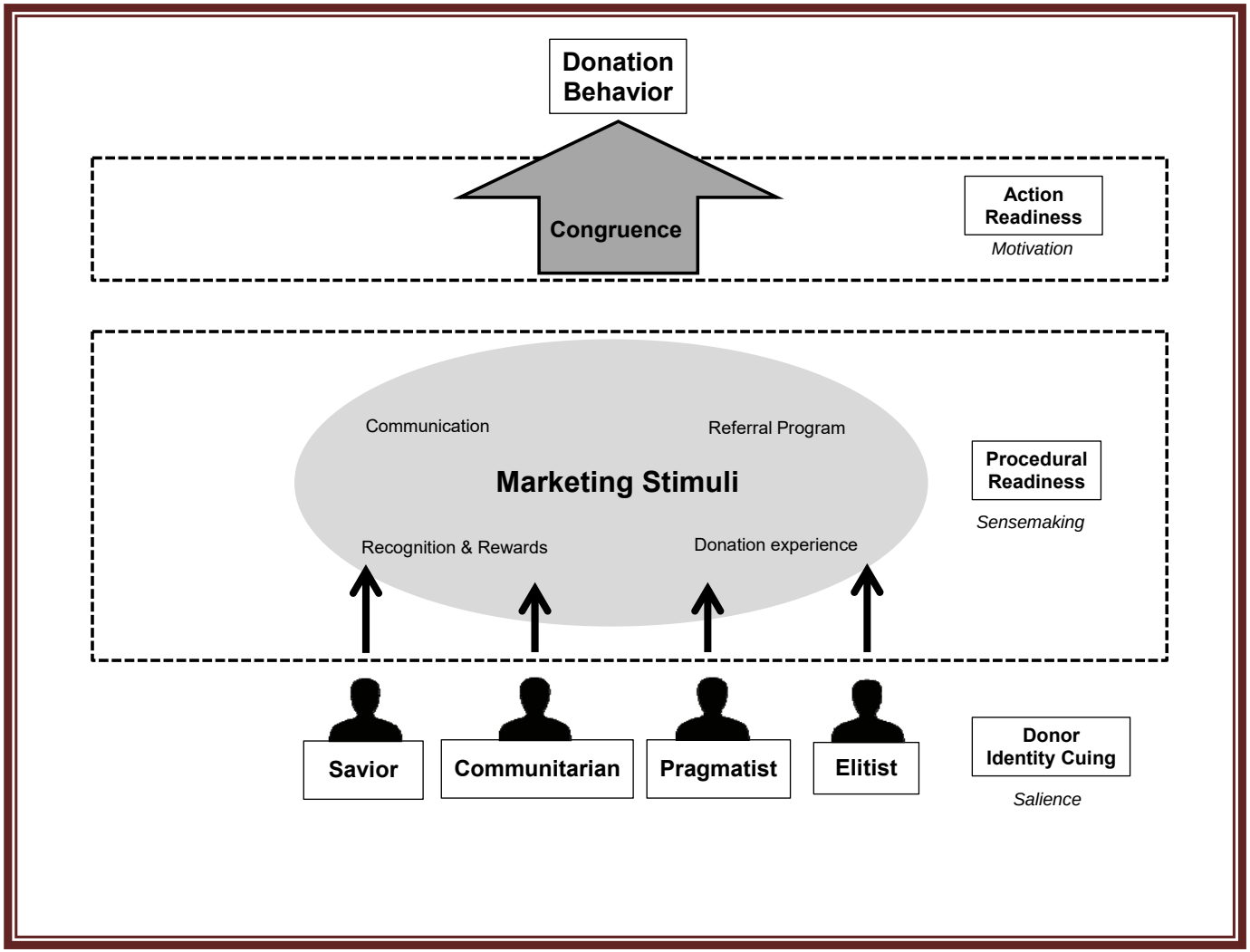

Figure 3. Integration of identity-based motivation model to donation behavior

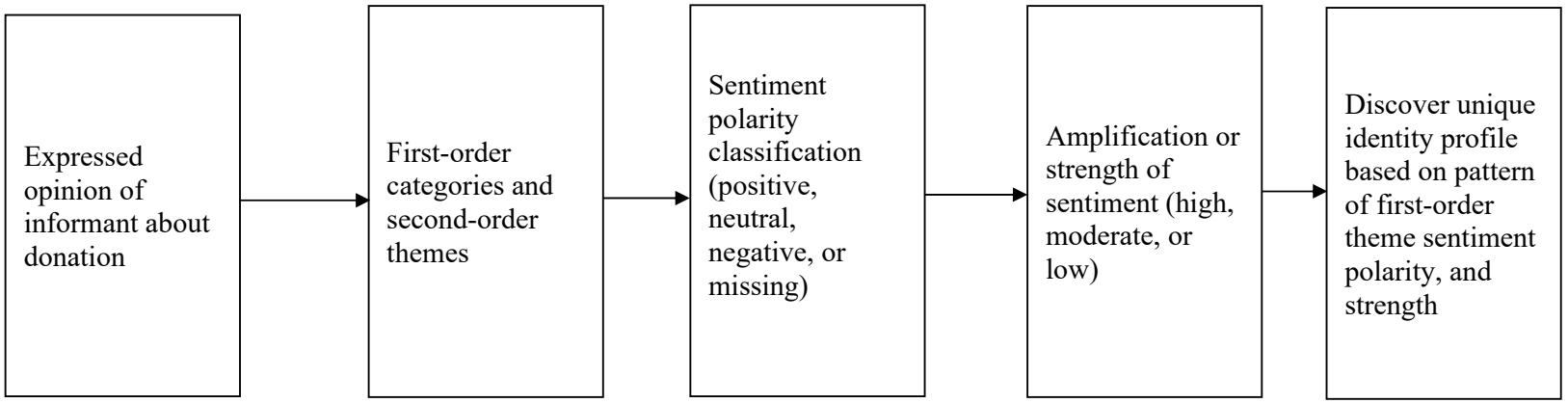

Figure 2. Data analyses process

Donor Type A

I donate blood because it helps save lives. I want to give the "gift of life" to others who need it.

Donor Type B

I donate blood because I want to give back to society and contribute to the community. I do it for the greater good.

Donor Type C

I donate blood because I know there is a need for it. It's the right thing to do. Everyone can donate blood.

Donor Type D

I donate blood because I am strong. I am not scared of pain or needles like others. Blood donation is not for everyone.

Figure 4: Identity profiles

Slogan A = Savior

Be a Hero.
Donate Blood and Save a Life.

Slogan B = Communitarian

Share with your Community. Donate Blood for the Greater Good.

Slogan C = Pragmatist

There is an Urgent Need.
Donate Blood, it's the Right Thing to do.

Slogan D = Elitist

You are Stronger than Others.
Donate Blood and be Special.

Figure 5: Identity slogans

Interview Protocol for Blood Identities

- *Talk me through the last time you gave blood or plasma from making the appointment through to the actual donation?*

Probe:

1. What motivated you to make your first appointment?
2. How was the experience? ... leading up to the donation (filling out forms, interview, finger prick, etc)? The actually donation? Post donation?
3. How do you feel about going through these required, repetitive processes?
4. What are the personal costs to you in making a donation? (Prompt: time, fear, discomfort, tiredness, pain, travel,)
5. How do you feel about these costs? Would they ever stop you from donating?
6. How important is it to you to know where your blood/plasma has gone or how it has been used? Why?
7. What are your feelings about being compensated, rewarded or acknowledged for your donation?
8. How important is giving blood to you? Why?
9. If you went to donate and you were rejected on some medical or lifestyle (travel to malaria country, tattoo) reason, how would this make you feel? Who would you blame? Would this stop you from donating in the future?

Theme 1: Goal for Donating	
To save lives	Well let's say I'm giving up to *save a life* (...) It's kind of like someone's life is depending on it. (Marg, age 18, novice donor) To think that what you're doing can actually *save someone's life* is pretty cool and pretty empowering. Makes you feel better. (Jason, age 19, infrequent donor) It's like one of those donations that you make to a relief fund, but this is much more than that, this is *saving someone's life* and potentially like just not a person's life, to probably helping someone's family, that's a big thing for me. (Ameet, age 22, novice donor) I am happy to come and give blood, so it's saving someone's life and I'm always there for them. (Prakash, age 22, novice donor) As I say it's a little bit of time and some blood and it might save someone's life, I just sort of think if I can do something like this, it's probably the best thing I can do. (Kate, age 29, frequent donor) Three quarters of an hour of your time every three months and if you can save someone's life then, or two or three or four or five then why not? (Harry, 64, regular donor) They are giving some life-giving blood that will be used to help somebody who is in trouble with an operation or an accident or whatever and who may need it. (Tim, age 68, regular donor)
To benefit the community	I feel good that I'm doing something for my fellow man, I hope that I can go to more people to do it, say if I or one of my friends or family members were sick, there would be enough supply for them as well. (Chris, age 20, infrequent donor) I just see it as something to do for the community I suppose, for human people in general, I don't know, for humanity or whatever, it's not important but I suppose it's one of those things, if we all just sit back… They're always struggling to get enough of the stuff, aren't they, to help other people. (Damien, age 50, novice donor) I think we should have more people donate blood and be on the organ donation you know, because who knows at the end of next week I might require 50 litres of blood and if

	everybody had the idea of oh I can't be bothered doing it, I'd be in dire straits wouldn't I, so that's the way I think about it, I'm hopefully helping someone else and that it is desperately needed. (Bec, age 58, regular donor) Putting in, giving back instead of just being part of society where you receive lots, it's my way of balancing up the ledger if you like. (Jerry, age 54, infrequent donor) If I can give a pint of blood every three months, I think that's good. I feel that I have done my service to the community. (Yvette, age 64, infrequent donor) Well, really it's just being a part of the community and society, helping in that way. Just being an active member of society. (Tabitha, age 30, infrequent donor) I just see it as something to do for the community I suppose, for human people in general, I don't know, for humanity or whatever, it's not important but I suppose it's one of those things, if we all just sit back... They're always struggling to get enough of the stuff, aren't they, to help other people. (Corinne, age 51, novice donor) It's like Karma. I'm not very religious but if anything, that kind of weighs pretty heavy on me and I haven't really had to go to a hospital at all for anything yet, but fingers crossed, I could someday be in that position where I need blood, and, I don't know, I think it would be hypocritical not to give blood" (Jack, age 19, first-time donor) It's not an endless supply, that there's always going to be blood in the Blood Bank, you know, it does generally need to be re-stocked" (Valerie, 52, a novice donor).
To do the right thing	I don't know, I just come because I feel that I'm obliged to come in a way that I'm happy to give my blood because I know that they need it, so it's something useful. It's just the way I feel, I feel the Red Cross need our blood and I'm prepared to give it, and I don't look for any reward or anything better than that, I just look for personal satisfaction thinking that you're helping out... I believe every one of us is capable and why not donate? (Robert, age 60, regular donor) Just doing the thing that should be done. To me it helps people, we should help each other a bit. (Denise, age 23, regular donor)

	You're just donating blood, nothing heroic about it. I'm not doing it for recognition, I'm just doing it because I can give blood… Because a lot of people can't do much and this is something that people can do. (Graham, age 44, novice donor)
To display special competence	Something like blood, I just think, it's only blood, my body produces more of it and here I am helping other people, so I do think, yes I think I am special and other people that do it are special too… But I must say I'm lucky in the sense that, and that's probably why I did end up going to a plasma donor is that I have great veins. Once I showed interest in what those bags with the yellow stuff in it were, they said to me you know, like you would be great for the plasma. I think, they were just, because you know you've got the best veins and stuff, so it was like I was born to be a plasma donor. (Carlotta, age 45, regular donor)

Theme 2: Desire for donation behavior to be public	
Desirable	I can see there is a milestone donor honour roll sitting behind you, and I think that's a nice thing to do…It's kind of nice if you say to someone like your boss that you're going to donate blood, oh good on you, it's nice to get a little pat on the back even though obviously it's not why I do it. It's nice to get that recognition from people who don't do it (Kate, age 29, regular donor) I told my wife that I'm going to. Afterwards I'll tell my friends and they will also know. (Gurpad, age 38, novice donor) I feel like a part of something like probably a lot of other people, because Red Cross is a good service and if anyone sees me with a sort of key chain or key ring, people would think – he's either working for them or he's donated blood or something and it makes me feel good and makes me look good. (Ameet, age 22, novice donor) One week you would do trinkets, the other week you could do practical, then you could do practical – trinkets – practical… Yes, it would be more a show that I have done it, a thing that shows I can do it. (Debbie, age 24, regular donor) Yes, I think it's great and it's good in a sense that it's promoting as well, because then if I use my pen somewhere else, other people might get people talking or at home or whatever. (Carlotta, age 45, regular donor)
Not desirable	I give them [gifts from Red Cross] to my nieces, they stick them on their teddy bear or something. It's not why I do it and I'm not going to wear it for advertising either. I don't want to guilt other people in doing it, I don't think it's the right thing to do for me. (Annie, age 36, regular donor) I hate to say it but I don't like the idea of going around being really flashy about something. I know a lot of people want to be like that – to join the club but it's a little bit obnoxious. (Clarke, age 20, infrequent donor) Yes I didn't want to blow my own trumpet, I don't wear jewellery, yes it does not fit with my character to wear something like that [a badge]. (Mike, age 56, regular donor) I quite like the anonymity that we have, the idea that you can give blood and it's appreciated but there's no huge fanfare about it. (Chris, age 20, infrequent donor)

	I don’t need it, when I crack 50 I’ll feel good about it, I don’t need the whole world knowing about it. I’m happy that the staff acknowledge me; it’s between me and the Blood Service it doesn’t need to be on the wall for me personally. (Laney, age 42, infrequent donor)

Theme 3: Perceptions of personal costs of donation	
Personal costs - for self	It costs time, that's the real cost, but as long as it stays within a certain range, you can do it, and you can do it easily without too much juggling around. When the time component starts to swing out, that's when it could become a problem (Corinne, age 51, novice donor) Well, I suppose you have to weigh up what you think is a priority for you and I think giving blood is a priority so I mean, there could be always [other] things I could be doing so I put that as fairly high priority, giving blood, I feel I am giving to somebody that actually needs it. (Anne, 58, regular donor) I said look I'm really not a needle person, I really, you know and I can't stand the sight of blood. (Eve, age 57, regular donor) The encouragement to not exert yourself with physical exercise has been a major constraint because I enjoy sport a lot. (Chris, age 20, infrequent donor) Yes, it hurts when it goes in but it's not that bad, and occasionally things haven't worked. (Tabitha, age 30, infrequent donor)
Personal costs - for others	I don't feel any different. I know people do. My brother fainted regularly. (Yvette, age 64, infrequent donor) I've got veins that you can see, standing beautifully and I do feel sorry for people who have insufficiently standing veins, because there's a lot of digging that goes on sometimes. (Denise, age 67, regular donor) And I understand that there's some people out there that obviously, I've seen school kids that go and nearly pass out, you know little things like that and I can understand people like that being put off by it, but for me, I'm, like I say, I think I was born to do it. (Carlotta, age 45, regular donor) Because I can and I'm not a pansy… Some are. I mean it's just a little needle. I know lots of people are scared of needles. (Debbie, age 24, regular donor)
No personal costs for self	It doesn't have any negative bearing on my life to come in and donate blood… I guess just the chance to help someone else out who needs something that **r**eally doesn't affect you other than giving up

	an hour of your time and that's pretty much what it is to me (Bryan, age 20, novice donor) It's been so long since I've been able to give, I've had the time and I don't look for anything, I have personal satisfaction knowing that my blood is going to be used in some sort of way, so I might as well give it, it does not cost me anything. (Robert, age 60, regular donor) I guess it's trying to help, I mean it does not cost me anything, it's just a bit of free time I guess and it's not much to be able to help somebody else. (Jess, age 33, infrequent donor) There's no reason not to, it's fairly painless, you can help someone, not that big an investment. (Shana, age 26, infrequent donor)
Theme 4: Expectations of reciprocity	
Pro-Reward	It does encourage me to want to go more. (Tabitha, age 30, infrequent donor) It's probably one of those things that's a sliding scale, the more you do it, the longer you do it for, the nicer the things are, but I don't think they need to be high value items. (Rodney, age 26, infrequent donor) More incentives. More incentives… I love them lots and I aim for them. Little things, nothing big. (Debbie, age 24, regular donor) Just little badges, and last time they gave us a little heart chocolate, it was very cutely wrapped up with a little gold ribbon, but it's just kiddie stuff, it's nice. They do appreciate it [our blood donation] – they do, people who work here certainly do. (Elizabeth, age 72, regular donor)
Against Reward	I don't need to be rewarded, I don't think, people shouldn't give blood to be rewarded, I mean it's a community service as far as I am concerned, I don't need to be compensated or rewarded. (Yvette, age 64, infrequent donor) I don't require monetary remuneration for whatever I give, you know I just think people should be, and it doesn't happen as much as it should I think these days, that people put themselves out to help someone else rather and then expect money for it or expect something in return…

	the beauty of it is that you come here just to donate, not to get something back from it. It would actually go against the principle that you come in to get something else, it's not what it's all about (Bec, age 58, regular donor) I haven't felt comfortable in those situations where, especially being students, friends have gone off and done it for 50 Deutschemarks in Germany or 20 bucks in the States, it's a poor edification for what to me is an act of giving. (Annie, age 36, regular donor) I don't think money is a good idea because it kind of pollutes the kind of doing good for others. (Kourtney, age 39, infrequent donor) I don't think monetary incentives should ever be put forth in this particular case. (Cory, age 31, regular donor) I'm not really motivated by any rewards. (Bryan, age 20, novice donor) No, because I think and this might be a little bit of my training coming through but I know that if you start giving money and things you probably have a lot more people who don't qualify to give blood, temped to give blood and you could end up with a lot more…. I don't think you should force anyone to give blood, so if you've walked in here then I think you realise it's good to help others, but if you start giving money, then people will do it for money and not really think about it properly. (Michelle, age 20, novice donor) It becomes very commercial if you start rewarding and no, I don't believe that is the way it should work. (Mike, age 56, regular donor) I've lived in other countries where you get paid for it and I really don't like that, I think that for me it's a personal choice, I would not want to be paid for it, it's a donation. It's not a transaction. (Annie, age 36, regular donor) What's wrong with the world if people don't give anymore, they have to get something in return all the time? No I don't need any rewards (Stacey, age 47, regular donor)
Recognition - *Appreciated*	I think the recognition I get is sort of – I can't think of the right word – subtle and respectful if that makes sense. I think that it's appropriate – I think what they do is very appropriate – you don't want to cheapen it and make it seem – like the person at the reception desk said – obviously, we don't want to grovel – I think that applies to anything in particular [for]

	something like this, so right now however it's recognized is appropriate. (Clarke, age 20, infrequent donor) They are courteous, they give you thank-yous and the staff here are always good (…)I personally don't need that, the pat on the back, but I think a lot of people might get something out of it. (...) yes it might be, yes I'd appreciate that, I'd appreciate feedback on my last visit. I just got told today that I'd given 55 times, so I didn't know how many times I'd been. The nurse asked me how many times I'd been and I said I didn't know so she looked it up and said 55 times. Yes, that sort of feedback probably is good and it might build up. Even if it was coming out in a letter saying last time …… (Robert, age 60, regular donor) I guess a thank you letter would be nice, but I don't think it's that important, although I think having a thank you letter makes it a little more formal not just like you walked in and gave blood and that's the end of it. It continues the relationship. (Michelle, age 20, novice donor) Like I think just a simple thank you is nice but you know what? The staff thank you; you get so many thank yous when you go and donate blood, it's not funny. Like you get thanked by the women who makes your appointment, from the girl who does the interviews, to the ones that do your blood, and stuff so you do come out feeling appreciated. (Carlotta, age 45, regular donor) Probably a thank you letter, just a recognition that you are giving. (Robert, age 60, regular donor) I consider the letter they send you as a form of recognition for past donations. I think that's sufficient and I like that. They should not change anything from that. (Clarke, age 20, infrequent donor)
Recognition - *Desirable*	They give certificates, they have award ceremonies, I know that one of the guys at the Tax Office has got whether it was 1,000 donations or something and he got a certificate. I mean they are nice things to do… I don't think that people do this, donations to the Blood Bank and charitable work for recognition, they do it because it's part of their ethos. However, to get more people in it might be something, not the actual ceremony or the presentation, but it's a way of saying [communicating to others], oh I never thought of doing that myself, kind of thing. (Jayne, age 52, infrequent donor)

	I guess people like to be recognized, it makes people feel good about what they have done. (Tabitha, age 30, infrequent donor) Ah, that's always nice, acknowledgement is always nice in some form or another. (Valerie, age 52, novice donor) I believe they should acknowledge the donor blood and who receives it, they should acknowledge their name and what condition they have this might improve the efficiency of getting people back to donate more and more again. (Prakash, age 22, novice donor)
Theme 5: Emotions	
Pride	Giving blood is a proud thing. (Marg, age 18, novice donor) I just can't explain it, I think it's a good feeling and it makes me feel proud of myself, it's funny but I feel good about myself, helping someone out. (Ameet, age 22, novice donor) I can't explain it so much, it's a natural feeling that you've sort of…. yes you're doing something for the community but I've done that every since I was 10, so that's just second nature to me, just the happiness that you've made somebody's day somewhere, whether it's entertaining the nurses, whether it's the actual blood getting given to somebody or something like that, you've made somebody's day. (Debbie, age 24, regular donor) I'm really proud and everyone that I speak to I really try to encourage people to give blood. (Carlotta, age 45, regular donor) There's a fair bit of self-acknowledgement anyway, so you're kind of proud that you have done it. (Valerie, age 52, novice donor)

Disappointment when unable to donate	Sad, very sad because I had come with a big Uni group and so everyone else was donating and I had to tell them my iron levels were low so I just sat there with a milk shake and they all were donating so it was very sad and very lonely with all those other people that donated and I was not allowed. (Debbie, age 24, regular donor) Sometimes they send me home if my haemoglobin is too low, not like a bloke, blokes have much more haemoglobin than women and mine is very borderline and I hate being sent home because I've come in for nothing but you're not giving anything. (Elizabeth, age 72, regular donor) I would feel a little disappointed because it has happened before and I was really disappointed, and I think I went on about it for a while. I think I would feel very disappointed. (Clarke, age 20, infrequent donor)

Member checks

A sample of 11 donors sourced by the Blood Service were sent by post the four donor descriptions simply labeled as Donor Type A to D, where A corresponded to the Savior, B the Communitarian, C the Pragmatist, and D the Elitist. The instructions asked them to first carefully read the donor descriptions and indicate those that they recognized from the donors they knew as given in Figure 1.

Insert Figure 1 about here

Of the 11 donors, four indicated *none*, they did not recognize the description in other donors. Yet, from one of the comments of an anonymous informant, it is unclear whether the informants did not recognize the descriptions in other donors or they simply did not sufficiently know other donors: *"No, I don't know anyone who matches any of these profiles. I am the only one from my family who donates blood. Also, I don't have any friends who donate blood.*" Of the remaining seven informants, the four identities were fairly evenly recognized.

Informants were also asked if they personally identified with any of the donor descriptions. In each case, the informants identified with at least one description. The Savior identity resonated with more than half the sample. One Savior informant writes:

> *what matters [to] me most is to know who was the recipient and how may I help them in future with or without a blood donation.*

Another informant who identifies as an Elitist writes:

> *I personally feel very special when I donate blood. As a type O neg there appears to be a great demand for this type, so I'm happy to oblige. The staff at blood bank make you feel very special and that's great…. I strongly recommend donating to others, but*

also feel it is a personal choice and most are scared of the needles. I personally will always donate.

Carefully read the above donor descriptions and indicate those that you have encountered?

Do you relate to any of the descriptions? If yes, which one (s)?

Donor Type A
These types of donors donate blood to help and save the lives of individuals. They are focused upon the one-to-one relationship between the donor and the recipient. These donors feel pride, happiness and a sense of well-being following a donation as they have given something special. They like others to know that they are a blood donor and they appreciate the small tokens (badges, stickers, key-rings, diary) the Blood Service gives them to display this. They are disappointed, but accepting when they are unable to donate for some reason. They typically began donating through someone's influence, and they encourage others to donate.

Donor Type B
These types of donors donate blood because they want to give back and contribute to the community. They are focused upon the effective working of the blood supply system, both for the benefit of community members who are in need, and in case they themselves are in need sometime in the future. They view blood donation as a private act and do not actively tell or try to recruit others. These donors are very aware of the personal costs (e.g., time, effort, and physical discomfort involved) of making a donation and will stop donating if it exceeds their threshold. They do not care for recognition or token incentives given by the Blood Service for their donation. They feel happiness and well-being following a donation.

Donor Type C
These types of donors have a very practical view about blood donation. They donate blood simply because they know there is a need for it and that they can do it. These donors downplay any personal costs (e.g., time, effort, and physical discomfort involved) that may be incurred in donating. They feel little emotion following a donation or if they are unable to donate for some reason. They also do not care for the small tokens that the Blood Service may offer them and do not actively recruit donors.

Donor Type D
These types of donors donate blood because they feel they are stronger, healthier or possess a blood type that is unique compared to most people; in other words, they feel special. Alternatively, they believe blood donors are rare and thus special compared to the general population. They love others to know that they are a blood donor and appreciate any recognition or tokens they receive from the Blood Service, especially if it allows them to advertise blood donation to others. These donors feel pride, happiness and a sense of well-being following a donation and get very upset when they are unable to donate.

Figure 1. Donor identity description